

# MOTHER'S KNOWLEDGE REGARDING NEWBORN CARE AND ASSOCIATED HEALTH PROBLEMS

Mr. Jagadeesh G Hubballi<sup>1</sup> | Mrs. Shubharani S Muragod<sup>2</sup> | Ms. Meghana Dharwadkar<sup>3</sup> | Ms. Deny Annu Mathew<sup>3</sup> | Ms. Divya Thomas<sup>3</sup>

- Asst. Professor, Dept of Child Health Nursing, KAHER Institute of Nursing Sciences, Belagavi. Karnataka, India.
- <sup>2</sup> Asst. Professor, Dept of OBG Nursing, KAHER Institute of Nursing Sciences, Belagavi. Karnataka, India.
- <sup>3</sup>B.Sc(N) Students, KAHER Institute of Nursing Sciences, Belagavi. Karnataka, India.

# **ABSTRACT**

Background: Globally under-five mortality rate has declined over the past few decades, neonatal mortality still remains high and four million deaths occur every year in the first month of life. Almost all (99%) neonatal deaths occur in the low-income and middle-income countries. In India alone, around one million babies die each year before they complete their first month of life, contributing to one-fourth of the global burden. The report, released recently at the National Conference on Child Survival and Development in New Delhi, claims that of the roughly 26 million children born in India each year, 1.2 million die during the first four weeks, that is, 30% of the 3.9 million global neonatal deaths<sup>2</sup>. The aim of the study was to identify the level of knowledge of primi mothers regarding newborn care and associated health problems. Materials and methods: Descriptive survey design was carried out among 60 antenatal mothers admitted in KLE's Dr. Prabhakar Kore Charitable Hospital, Belgaum by using convenient sampling method. A pretested structured knowledge questionnaire was used to collect data. Data was analysed using descriptive and inferential statestics. Results: The present study showed that majority of primi mothers had poor knowledge on umbilical cord infection 44(73.3%), diarrhea 32(53.3%), diaper rash 46(76.6%), vomiting 34(56.6%) and fever 36(60%). There was no association between newborn care and demographic variables such as age, religion, occupation and employment status, economic status, type of family, area of residence. But significant association was found between mother education and area of residence. Hence null hypothesis was accepted. Conclusion: The present study concludes that there is a need to provide adequate information to primi mothers about newborn care, common newborn health problems and this will help mother's to care their newborn and to prevent complications.

KEYWORDS: Newborn care, Knowledge of primi mothers, Common neonatal health problems.

## INTRODUCTION:

The birth of a baby is one of the most happiest and emotional event that can occur in mothers life time. After birth of the child, its health depends upon the health care practice adopted by the family, especially by mothers<sup>1</sup>.

Globally under-five mortality rate has declined over the past few decades, neonatal mortality still remains high. Globally four million deaths occur every year in the first month of life. Almost all (99%) neonatal deaths occur in the low-income and middle-income countries. In India alone, around one million babies die each year before they complete their first month of life, contributing to one-fourth of the global burden. The report, released recently at the National Conference on Child Survival and Development in New Delhi, claims that of the roughly 26 million children born in India each year, 1.2 million die during the first four weeks, that is, 30% of the 3.9 million global neonatal deaths².

Several misconception, ignorance and inadequacy of knowledge in relation to newborn care is prevalent among antenatal mothers especially prime gravid women.

National Rural Health (NRHM) and integrated management of neonatal and childhood illness (IMNCI). An added capacity of Auxiliary Nurse Midwives (ANMs) and accredited social health activists (ASHAs), for careful tailoring of behavior change according to the local context, will bring about positive change and significant improvements in newborn care at home and reduces the neonatal mortality<sup>3</sup>.

The purpose of this study is to assess the knowledge of primi mothers with regard to neonatal care and associated health problems.

## MATERIALS AND METHODS:

Descriptive survey design was carried out among 60 antenatal mothers admitted in KLE's Dr. Prabhakar Kore Charitable Hospital, Belgaum by using convenient sampling method. A pretested structured knowledge questionnaire was used to collect data. Data was analysed using descriptive and inferential statestics.

#### **DESCRIPTION OF THE TOOL:**

A structured knowledge Questionnaires consists of two section. Section A: item on demographic variables like age, religion, educational status, occupation, income, type of family, area of resident. Section B: items on knowledge about newborn care among Primi mothers, vomiting, breast feeding, diaper rash, umbilical cord infection, fever, diarrhea and immunization.

# RESULTS AND DISCUSSION:

Table 1: Sociodemographic variables of primi mothers

(n=60)

Sl. No	Demographic variables	Frequency	Percentage (%)		
1	Age				
	18-21Years	36	60		
	22-25 Years	18	30		
	26-29 Years	6	10		
2	Religion				
	Hindu	24	40		
	Muslim	24	40		
	Christian	12	20		
3	Education status of mother				
	Primary	20	33.3		
	Secondary	20	33.3		
	PUC	15	25		
	Degree	5	8.3		
4	Occupation of mother				
	Private	10	16.6		
	Government	5	8.3		
	Housewife	45	75		
5	Type of family				
	Nuclear family	18	30		
	Joint family	32	53.3		
	Extended family	10	16.7		
6	Income of the primi mothers				
	No income	45	75		
	Less than 10000	10	16.6		
	More than 10000	5	8.3		
7	Area of residence				
	Urban	34	56.6		
	Rural	26	43.4		

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Majority of the primi mothers 36(60%) were in the age group 18-21yrs, 18(30%) were in the age group 22-25 yrs and 6(10%) were in the age group 26-29yrs. Majority of the primi mothers were Hindus 24(40%) and muslims 24 (40%) and 12 (20%) were Christians. Majority of the primi mothers 20(33.3%) had primary education, 20(33.3) had secondary education, 15(25%) had pre university and 5(8.3%) were completed degree. Majority of primi mothers 45(75%) were house wives, 5(8.3%) were government employees, 10(16.6%) were private employees. Majority of primi mothers 18(30%) belongs to nuclear family, 32(53.3%)belongs to joint family and 10(16.7)belongs to extend family. Majority of primi mothers 45(75%%) had no income, 10(16.6%) were income less than 10000 and 5(8.3%) were having family income less than 10000. Most of primi mothers 34(56.6%) were staying in urban area and 26(43.4%) were staying in rural area.

Table 2: Knowledge scores of primi mothers on common newborn problems

(n=60)

Content	Grading of knowledge scores		
Content	Good	Average	Poor
Vomiting,	7	19	34
Diaper Rash,	3	11	46
Umbilical Cord Infection,.	2	4	44
Fever,	9	15	36
Diarrhea	11	17	32

Table 2 shows that majority of the primi mothers had poor knowledge on common problems of the newborn and its care and management

# Association of Demographic Variables with Knowledge of Primi Mother on Newborn Care:

The study findings showed that there is no association between newborn care and demographic variables such as age, religion, occupation and employment status, economic status, type of family, area of residence, But there is significant association between mother education and area of residence. Hence the null hypothesis accepted.

#### DISCUSSION:

In the present study it showed that the majority of primi mothers had poor knowledge on umbilical cord infection 44(73.3%), diarrhea 32(53.3%) and diaper rash 46(76.6%). A Descriptive study was conducted among the mothers of neonates in the Maternity Unit of a Medical College Hospital in Mangalore. The study result shows that Knowledge on umbilical cord infection was average in 29 (48.33%), good in 27 (45%), and poor in 4 (6.67%). Knowledge on constipation and diarrhea were average in 38 (63.34%), good in 11 (18.33%), and poor in 11 (18.33%) and no association was found between the knowledge of primi mothers and selected baseline variables, such as, age, education, religion, occupation, type of family or area of dwelling. Another study on knowledge of mothers on diarrhea in children 'dirty' feeding bottle (23%), excessive 'heat' (75%) and 'cold'(14.5%), over feeding (22.9%), top milk (4.2%) as the causes. Only 10.4% were aware of the specific measures for prevention of diarrhea.

#### CONCLUSION

The present study concludes that there is a need to provide adequate information to primi mothers about newborn care, common newborn health problems and this will help mother's to care their newborn and to prevent complications.

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